

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF CHRISTIAN J. BRACKO	COURT CASE NUMBER 08-239 JL
DEFENDANT ALEX CAINE	TYPE OF PROCESS Summons Complaint Answer

**SERVE AT** { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Alex Caine, San Pablo Police Officer  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
13880 San Pablo Avenue, San Pablo, CA 94806

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Mister Phillips  
LAW OFFICE OF MISTER PHILLIPS  
P.O. Box 1162  
Pinole, CA 94564

Number of process to be served with this Form 285

Number of parties to be served in this case

2

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

415-522-3080

GLORIA ACEVEDO

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 1	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk 	Date 2/11/08
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

LEHMY CORBIN, DEPUTY CITY CLERK

Address (complete only different than shown above)

13831 SAN PABLO AVE  
SAN PABLO, CA 94806☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Date 2/12/08	Time 0920	<input checked="" type="checkbox"/> am <input type="checkbox"/> pm
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Signature of U.S. Marshal or Deputy

Service Fee \$45.00	Total Mileage Charges including endeavors 8.25	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

**PRINT 5 COPIES:**

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00